



AN IMPORTANT ACTION. A BIG IMPACT.

WHY IS CANCER SCREENING IMPORTANT?

According to the American Cancer Society, about 606,520 people are expected to die from cancer in 2020. Regular screening can help find certain cancers early, when they are most likely to be treated successfully.¹ Learn what screening tests the American Cancer Society recommends, when you should have them, and talk to a health care professional about the best screening plan for you.

DID YOU KNOW?

Detecting cancer early through screening **reduces deaths** from colorectal, breast, cervical, lung (among current and former heavy smokers), and likely prostate.^{1,2}

– American Cancer Society

WHAT IS CANCER SCREEN WEEK?

Cancer Screen Week is a public health initiative founded by Genentech, the American Cancer Society, Stand Up To Cancer and Rally Health to increase awareness of the benefits of screening for early detection of certain cancers. It occurs in the first full week of December each year. This year's nationwide collaborative effort to raise awareness about recommended cancer screenings runs from December 7 through December 11, 2020.

HOW CAN I GET INVOLVED?

- Visit www.CancerScreenWeek.org to learn more about the potentially life saving benefits of cancer screening and download helpful resources for talking with your doctor.
- Spread the word about Cancer Screen Week and join the collective effort to help save more lives from cancer.

WHO SHOULD BE SCREENED FOR CANCER?

Screening refers to tests and exams used to find cancer in people who don't have symptoms. Early detection means finding and diagnosing cancer earlier than if a person would wait for symptoms to start. Screening increases the chance of detecting certain cancers early when they might be easier to treat.^{1,2} Learn what screening tests the American Cancer Society recommends so you can talk to your health care provider about the screening plan that's right for you.^{3,4}





BREAST CANCER

Breast cancer that's found early, when it's small and has not spread, is easier to treat successfully. Getting regular screening tests is the most reliable way to find breast cancer early.^{2,3}

- ✓ Women ages 40 to 44 who are at average risk of breast cancer should have the choice to start annual breast cancer screening with mammograms if they wish to do so.
- ✓ Women ages 45 to 54 should get mammograms every year.
- ✓ Women 55 and older can switch to mammograms every two years, or can continue yearly screening. Screening should continue as long as a woman is in good health and is expected to live 10 more years or longer.
- ✓ Most women at high risk should begin screening with MRI and mammograms when they are 30 and continue for as long as they are in good health.¹



COLORECTAL CANCER

With regular screening, colorectal cancer can often be prevented or found at an early stage when it might be easier to treat.^{2,6}

- ✓ People 45 or older and at average risk should be screened regularly for colorectal cancer.³
- ✓ There are several effective tests available, including visual tests (colonoscopy, CT colonography, and flexible sigmoidoscopy) and at-home stool tests that look for abnormal fecal DNA or blood.³
- ✓ People at higher risk may need to start screening at a younger age, be screened more frequently, or get specific tests.³
- ✓ If a person chooses to be screened with a test other than colonoscopy, any abnormal test result should be followed up with a timely colonoscopy.³



PROSTATE CANCER

It's not clear if the benefits of screening all men for prostate cancer outweigh the risks. Men should have a chance to make an informed decision with their healthcare provider about whether or not to be screened. Men should not be screened unless they have received information about the uncertainties, risks, and potential benefits of prostate cancer screening.^{2,3}

- ✓ Starting at age 50, men at average risk for prostate cancer who are expected to live at least 10 more years should talk to a healthcare provider about the pros and cons of screening.
- ✓ Starting at age 45, African American men and men who have a father or brother who had prostate cancer before age 65 should talk to a healthcare provider about the pros and cons of screening.
- ✓ Starting at age 40, men who have multiple family members who had prostate cancer before age 65 should talk to a healthcare provider about the pros and cons of screening.³



CERVICAL CANCER

The HPV test finds HPV infections most likely to cause cervical cancer. It can be done as a primary HPV test (by itself) or at the same time as the Pap test (co-test). The Pap test looks at cells from the cervix to find cancer and pre-cancer.⁴

- ✓ People with a cervix who are at average risk should start cervical cancer screening at age 25.
- ✓ Those aged 25-65 should have a primary HPV test every 5 years.
- ✓ If primary HPV testing is not available, screening can be done either with a co-test (HPV test combined with a Pap test) every 5 years or a Pap test alone every 3 years.
- ✓ Those over the age of 65 who have no history of CIN2+ within the past 25 years and have had regular screening in the past 10 years with normal results should not be tested for cervical cancer. CIN2+ is defined as moderately abnormal cells on the surface of the cervix, usually caused by certain types of HPV.⁵
- ✓ Adults who have been vaccinated against HPV should still follow these guidelines.
- ✓ Unless surgery was done for cancer or pre-cancer, those who have had a total hysterectomy (removal of the uterus and cervix) should stop screening. People who have had a hysterectomy without removal of the cervix should continue following these guidelines.⁴



LUNG CANCER

Annual screening for lung cancer with low-dose CT (LDCT) scan may be an option for people at higher risk of lung cancer who meet certain criteria. The main benefit of annual LDCT screening is a reduced risk of dying from lung cancer.^{2,3}

- ✓ Lung cancer screening is recommended for people 55 to 74 years of age who are in fairly good health AND are either still smoking or have quit within the last 15 years AND have at least a 30 pack-year smoking history AND have received counseling to quit smoking if they currently smoke. They also should have been told of the possible benefits and limitations of LDCT screening, and have screening at a facility that is experienced in lung cancer screening and treatment.³



SKIN CANCER

Anyone can get skin cancer. Although the American Cancer Society does not have screening guidelines for skin cancer, everyone should know their own skin. Regularly checking the skin can help and many skin cancers early, when they are easier to treat.²

- ✓ Many doctors recommend that everyone check their own skin, preferably once a month. This helps a person know the pattern of moles, blemishes, freckles, and other marks on their skin so they can spot and report changes or new areas of concern.^{7,8}
- ✓ Some health care providers do skin exams as part of routine health check-ups.^{7,8}
- ✓ Regular skin exams by a healthcare professional are especially important for people who are at higher risk of skin cancer, such as people with reduced immunity, a personal or strong family history of skin cancer, and those with many unusual moles.^{7,8}

REFERENCES

1. American Cancer Society. Cancer Facts & Figures 2020. Available at: <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2020/cancer-facts-and-figures-2020.pdf>. Accessed September 16, 2020. 2. American Cancer Society. Cancer Prevention & Early Detection Facts & Figures 2019-2020; 2019. Available at: <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-prevention-and-early-detection-facts-and-figures/cancer-prevention-and-early-detection-facts-and-figures-2019-2020.pdf>. Accessed September 16, 2020. 3. Smith RA, Andrews KS, Brooks D, et al. Cancer screening in the United States, 2019: A review of current American Cancer Society guidelines and current issues in cancer screening. CA Cancer J Clin. 2019. Available at: <https://acsjournals.onlinelibrary.wiley.com/doi/full/10.3322/caac.21557>. Accessed September 16, 2020. 4. Fontham ETH, Wolf AMD, Church TR, et al. Cervical Cancer Screening for Individuals at Average Risk: 2020 Guideline Update from the American Cancer Society. CA Cancer J Clin. 2020. Available at: <https://acsjournals.onlinelibrary.wiley.com/doi/full/10.3322/caac.21628>. Accessed September 16, 2020. 5. National Cancer Institute (NCI). NCI Dictionary of Cancer Terms. CIN 2. Available at: <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/cin-2>. Accessed September 16, 2020. 6. American Cancer Society. Colorectal Cancer Facts & Figures 2020-2022; 2020. Available at: <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures-2020-2022.pdf>. Accessed September 16, 2020. 7. American Cancer Society. Can Basal and Squamous Cell Skin Cancers Be Found Early? Available at: <https://www.cancer.org/cancer/basal-and-squamous-cell-skin-cancer/detection-diagnosis-staging/detection.html>. Accessed September 16, 2020. 8. American Cancer Society. Can Melanoma Skin Cancer Be Found Early? Available at: <https://www.cancer.org/cancer/melanoma-skin-cancer/detection-diagnosis-staging/detection.html>. Accessed September 16, 2020.